





PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

		Application Number		10/064,215		
TRANSMITTAL			Filing Date		06/21/2002	
FORM (to be used for all correspondence after initial filing)		First Named Inventor Jyh-		Jyh-Fong Lin		
		Group Art Unit				
			Examiner Name			
Total Number of Pages in This Submission			Attorney Docket Number VIAP0029USA			
		ENCL	OSURES (c	heck a	ll that apply)	
Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53		Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks)n	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below):	
	SIGNATU	I IRE OF APPLIC	CANT, ATTORNEY	r. OR A	GENT	
Firm or Individual name	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT WINSTON HSU					
Signature Winston Hon						
Signature Winston Hon Date 6/24/200>						
CERTIFICATE OF MAILING						
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:						
Typed or printed name						
Signature				Date		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

00
ĺ

Complete if Known				
Application Number	10/064,215			
Filing Date	06/21/2002			
First Named Inventor	Jyh-Fong Lin			
Examiner Name				
Group Art Unit				
Attomory Dockst No.	Ι/ΙΔΡΩΩΩΙΙSΔ			

METHOD OF PAYMENT	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES				
Denosit	Large Small				
Account 50-0801	Entity Entity Fee Fee Fee Fee Fee Fee Paid				
Deposit North America International Patent	Code (\$) Code (\$)				
Account Name Office	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to				
Check Credit card Order Other	Examiner action 113 1,840* 113 1,840* Requesting publication of SIR after				
FEE CALCULATION	Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 400 216 200 Extension for reply within second month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month				
101 740 201 370 Utility filing fee	118 1,440 218 720 Extension for reply within fourth month				
106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month				
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal				
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal				
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing				
	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 0.00	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional				
Fee from Ext <u>ra Claims below Fee Paid</u>	142 1,280 242 640 Utility issue fee (or reissue)				
Total Claims20** = X =	143 460 243 230 Design issue fee				
Independent Claims - 3** = X =	144 620 244 310 Plant issue fee				
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner				
	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per				
103 18 203 9 Claims in excess of 20	property (times number of properties)				
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(a))				
104 280 204 140 Multiple dependent claim, if not paid	149 740 249 370 For each additional invention to be				
109 84 209 42 ** Reissue independent daims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination				
SUBTOTAL (2) (\$) 0.00	of a design application Other fee (specify)				
30B101AL (2) (47 3.00	0.00				
**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00				

SUBMITTED BY				applicable)
Name (Print/Type)	WINSTON HSU	Registration No. 41,526 (Attorney/Agent)	Telephone	886-2-8923-7350
Signature	Winston	1=n	Date	5005/12/0

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.